TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Complete if Known					
Application Number	09/552,705	TEC			
Filing Date	April 19, 2000	HC			
First Named Inventor	Shiuan CHEN et al.	ENT			
Examiner Name	C. Fronda	H 1			
Group Art Unit	1652	1600/290			
Attorney Docket Number	2124-311	2900			

ENCLOSURES (check all that apply)

X.	Fee Transmittal Form	Ш	Assignment Papers		After Allowance Communication to Group	
	X Fee Attached		Drawing(s)		•	
X	Amendment/Reply		Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences	
	☐ After Final		Petition		Annual Communication to	
	X Affidavits/declaration(s)		Petition to Convert to a Provisional Application	LJ	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
X	Extension of Time Request		Power of Attorney, Revocation	П	Proprietary Information	
	Express Abandonment Request	ш	Change of Correspondence		•	
☞	Information Bt. 1		Address		Status Letter	
X	Information Disclosure Statement (3 refs.)		Terminal Disclaimer	X	Other Enclosure(s) (please identify below):	
	Certified Copy of Priority Document(s)		Request for Refund	Decl	eclaration § 1.132	
			CD, Number of CD(s)	·		
	Response to Missing Parts/ Incomplete Application		REMARKS:			
	Response to Missing Parts under 37 CFR 1.52 or 1.53		NEIVIANNO.			

SUBMITTED BY				Complete (if applicable)	Complete (if applicable)	
NAME AND REG. NUMBER	Martha Cassidy, Reg. No. 44,066					
SIGNATURE	1	9	DATE	5/10/02	DEPOSIT ACCOUNT USER ID	

OIPE	٠ <u>٠</u>				
MAY 1 0 2002 0		Complete if Known			
		Application Number		09/552765	
FEE TRANSMITTAL for FY 2001 (Small Entity)	Filing Date	April 19, 200	,		
	First Named Inventor	Shiuan CHE	CHEN et al.		
(oman zn	intry /	Examiner Name	C. Fronda	DECEIVED	
		Group Art Unit	1652	MEURIVED	
Total Amount of Payment	(\$)236.00	Attorney Docket Number	2124-311	MAY 1 5 2002	

METHOD OF PAYMENT (check one)	FFF (CAL CU	LATION (continued) TECH CENTE	:R 1600/290(
The Commissioner is hereby authorized to charge			NAL FEES	
additional fees and credit any overpayment to	Fee	Fee	VAL I ELS	
Deposit Account Number 02-2135 in the name of	Code	Paid	Fee Description	Can Daid
Rothwell, Figg, Ernst & Manbeck	205	65	Surcharge - late filing fee or oath	Fee Paid
Training Tigg, Error & Managor	227	25	Surcharge - late provisional filing fee	i j
Charge any Additional Fee Denvised Heden			or cover sheet	L j
Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17	139	130	Non-English specification	1 1
37 OFR 1.16 and 1.17	147	2,520	For filing a request for reexamination	1 1
	112	920	Requesting publication of SIR	; ;
X Applicant claims small entity status.			prior to Examiner action	ı j
<u></u>	113	1,840*	Requesting publication of SIR	r 1
2. X Payment Enclosed:			after Examiner action	. ,
X Check	215	55	Extension for reply within first month	[56.00]
	216	200	Extension for reply within second month	i i
Credit Card	217	460	Extension for reply within third month	ii
	218	720	Extension for reply within fourth month	i i
FEE CALCULATION	228	980	Extension for reply within fifth month	i i
	219	160	Notice of Appeal	i i
1. FILING FEE	220	160	Filing a brief in support of an appeal	i i
Fee Fee	221	150	Request for Oral Hearing	i i
^	138	1,510	Petition to institute a public use proceeding	i i
Code \$ Fee Description Fee Paid 201 370 Utility filing fee []	240	55	Petition to revive -unavoidable	i i
206 165 Design Filing Fee []	241	640	Petition to revive - unintentional	i i
207 255 Plant Filing Fee	242	640	Utility issue fee (or reissue)	i i
208 370 Reissue Filing Fee []	243	230	Design issue fee	i i
214 80 Provisional Filing Fee []	244	310	Plant issue fee	i i
214 00 Flovisional Filling Fee []	122		Petitions to the Commissioner	ii
OUDTOTAL &	123	50	Processing fee under 37 CFR 1.17(q)	i i
SUBTOTAL \$	126	180	Submission of Information Disclosure Statement	[180.00]
0. 01.414.0	581	40	Recording each patent assignment per property	i i
2. CLAIMS			(times number of properties)	• •
Extra	246	370	Filing a submission after final rejection	[]
Claims Fee Fee Paid			(37 CFR .129(a))	-
Total Claims [] - 20** = [] x \$9 = []	249		For each additional invention to be	[]
Independent			examined (37 CFR 1.129(b))	
Claims []- 3** = [] x 42 = []	279	370	Request for Continued Examination (RCE)	[]
Multiple Dependent Claims + 140 = []	169	900	Request for expedited examination	[]
***************************************			of a design application	
**or number previously paid, if greater;	195	300	Publication fee for early, voluntary, or	[]
	400	000	normal publication	
SUBTOTAL \$	196	300	Publication fee for republication	[]
	089	200	Filing an application for patent term adjustment	[]
	090	400	Request for reinstatement of term reduced	
	Other le	e (specify	')	[]
	* Poduce	ad by Bac	sia Filing Foo Daid CUDTOTAL	6006.00
	Reduce	eu by bas	sic Filing Fee Paid SUBTOTAL	\$236.00
SUBMITTED BY			Complete (if application	able)
MAME AND				
NAME AND Martha Cassidy, Reg. N	lo. 44	1,066		ļ
SIGNATURE		DATE	5/4/07	
		DATE	5/18/02 DEPOSIT ACCOUNT	NT TW
		L	USER ID	1 1